Adolescents' Subjective Distress Over Their Emotional/Behavioral Problems

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This study analyzed the relations among 151 7th- and 8th-grade adolescents' self-evaluations of the occurrence of their behavior, their own subjective distress over their behavior, their perceptions of their personal competence, their perceptions of their mothers' and fathers' distress over these behaviors, and their parents' reports of the occurrence of adolescent behaviors. As hypothesized, adolescents' self-reports of occurrence of their behaviors were significantly but moderately correlated with their subjective distress about these behaviors, and adolescents made a distinction between the occurrence of a behavior and their distress about it. Externalizing behaviors were rated by adolescents as more distressing to mothers and to fathers than to adolescents themselves, and conversely, internalizing behaviors were rated as more distressing to self than to parents. Ratings of subjective distress were significantly related to self-perceptions of behavioral conduct and self-worth, whereas parents' ratings of the occurrence of behavior were not related to these self-perceptions.

An important component of clinical child and adolescent assessment involves obtaining children's and adolescents' self-reports of their emotions and behaviors. The importance of child and adolescent self-reports lies in the unique perspective on their behavior that these reports provide, a perspective that may not be accessible to external raters such as parents or teachers. Furthermore, although children and adolescents rarely refer themselves for clinical services, their personal perspectives on their behaviors and emotions may be an important factor to take into account in clinical interventions. The significance of children and adolescents' self-reports is reflected by their inclusion in Achenbach's (1985) multiaxial taxonomy for child and adolescent assessment. Within this framework, self-reports are included within the direct assessment axis, to be considered along with data from the additional axes of parent reports, teacher reports, cognitive assessment, and physical assessment.

Existing self-report measures of children and adolescents' emotions and behaviors have focused on reports of the occurrence of behavior. That is, respondents are asked to report how often each of a list of emotions and behaviors have occurred within a specified period of time. Although the self-reported frequency of occurrence of problematic behaviors and emotions has been shown to be an important variable in distinguishing referred from nonreferred youth (Achenbach & Edelbrock, 1987), children and adolescents' subjective distress has been overlooked. Although adult self-report measures often ask respondents to describe their distress or discomfort about their behavior and emotions (e.g., Bryant & Veroff, 1982; Derogatis, 1983), these perceptions have not been assessed in children and adolescents. Children and adolescents' ratings of the degree to which they are distressed or bothered by their behavior and emotions may be important in understanding the meaning of these behaviors and feelings to the child or adolescent. More generally, perceptions of subjective distress over one's behaviors and emotions may be viewed as a component of the broader "self-system" of perceptions of personal competencies, attributes, and beliefs about the causes and meaning of one's actions (e.g., Harter, 1983).

Acknowledgement of the occurrence of a behavior does not necessarily mean that the child or adolescent is distressed by the behavior, that she or he thinks the behavior is distressing to others, or that she or he believes that the behavior should change. For example, although a child or adolescent may acknowledge that a behavior occurs (e.g., by rating I get in many fights as very true), he or she can also provide reasons why the behavior is not personally distressing (e.g., "I like to fight because I always win and I get a lot of attention for it"). It may be important in clinical interventions to know whether the target behaviors are ones that the child or adolescent perceives as troublesome and therefore may be motivated to change. Furthermore, there may be emotions and behaviors that are not distressing to a child or adolescent but are distressing to a parent or teacher, and vice versa.

Although the distinction between the occurrence of a behavior and subjective distress over the behavior has not been investigated with children or adolescents, research utilizing adults' reports of children's behavior further highlights the potential importance of this issue (Algozzine, 1977; Weisz et al., 1988). For example, Weisz et al. (1988) found that teachers, clinical psychologists, and parents rated externalizing or undercon-
trolled child problems as more serious, more worrisome, and less likely to improve with time, than internalizing or over-controlled problems. The opposite pattern might be expected for children and adolescents' subjective distress, with internalizing problems being more personally bothersome than externalizing problems. In a related set of studies, the Eyberg Child Behavior Inventory was used to assess parents' ratings of the occurrence of their children's behaviors and the degree to which the behaviors were a problem for the parent (Eyberg & Robinson, 1983; Eyberg & Ross, 1978; Robinson, Eyberg, & Ross, 1980). Their findings suggested that the occurrence of a behavior was not synonymous with the behavior's being perceived as problematic or bothersome. Distinctions by children and adolescents between behaviors that are distressing to themselves, distressing to others (such as parents or teachers), or not distressing at all have not been investigated.

The present study investigated adolescents' subjective distress about their behaviors and emotions. First, adolescents' self-reports of subjective distress were expected to differ from their self-reports of the occurrence of behaviors and emotions. Second, adolescents' self-reports of subjective distress were expected to differ from their perceptions of others', in this case parents', distress over the adolescents' behaviors or emotions. Third, adolescents' ratings of subjective distress were expected to be higher for internalizing problems than for externalizing problems, whereas they should perceive their parents as more distressed by externalizing than internalizing problems. Fourth, adolescents' self-reports of subjective distress were expected to be more highly correlated with other aspects of the self-system, in this case self-perceptions of competence, than were ratings of the adolescent's behavior by another informant. Our study investigated these hypotheses in a sample of young adolescents and their parents.

**Method**

**Subjects**

Participants were 151 seventh- and eighth-grade adolescents (85 boys and 66 girls) from four schools in a small urban area in Vermont. Seventy mothers and 48 fathers of these adolescents also participated. Approximately 40% of the available adolescents agreed to participate. The adolescents ranged from 11 to 15 years old, with a mean age of 13.04 (SD = .96). Reflecting the Vermont population, approximately 95% of the participants were White, with the remaining 5% equally distributed between Black and Asian. Marital status of adolescents' biological parents was as follows: 59% still married; 18% divorced and currently remarried or living with a partner; and 23% single (never married), separated, or divorced and not remarried. Mothers had a mean of 13.48 years of education (SD = 2.34), and fathers had an average of 13.71 years (SD = 3.04). On the basis of Hollingshead's (1975) four-factor index of socioeconomic status (SES), which utilizes gender, marital status, education, and occupation, the family SES composition was as follows: 4% Level I (unskilled workers); 17% Level II (semiskilled workers); 25% Level III (skilled or clerical workers); 41% Level IV (medium business or minor professionals); and 13% Level V (major business or major professionals). This sample is comparable to the population in this section of Vermont in marital status, education, and SES (Vermont Office of Policy Research and Coordination, 1988).

In response to the question, "Have you ever received any professional treatment (such as individual or family counseling or psychotherapy, medication) to help with your behavior or emotions?" 23% of the adolescents reported that they had received psychological treatment at some time. This is similar to the overall prevalence of young adolescents in need of treatment (17.6%) found by Anderson, Williams, McGee, and Silva (1987) in a community sample.

**Measures**

**Emotional/behavioral problems.** Adolescents' self-reports of the occurrence of their emotional/behavioral problems were assessed with the Youth Self-Report (YSR; Achenbach & Edelbrock, 1987). The YSR includes 119 behavior items (102 of which are considered problematic, 16 of which are considered socially desirable, and 1 open-ended "other physical problem" item) that participants rate on a 3-point scale as not true, somewhat or sometimes true, or very true or often true of themselves. Normative data for the YSR were obtained from samples of nonreferred children and adolescents aged 11 to 18, and factor-analytically derived scales were based on a sample of clinically referred children and adolescents. Reliability and validity have been well established (Achenbach & Edelbrock, 1987). Four scores were used in the present analyses: (a) T scores of total emotional/behavioral problems; (b) raw item mean scores of all items except the 16 socially desirable items and the 1 open-ended "other" item, yielding a total of 102 items included in the raw item mean scores; (c) raw item mean scores of internalizing items; and (d) raw item mean scores of externalizing items. The internalizing and externalizing raw item mean scores were calculated by using the items from the factor-analytically derived scales for boys and girls separately identified by Achenbach and Edelbrock (1987).

The occurrence of adolescents' emotional/behavioral problems was also assessed through maternal report and paternal report with the Child Behavior Checklist (CBCL; Achenbach & Edelbrock, 1983). The CBCL consists of 120 behavior problem items including 16 problem items that have been replaced with 16 socially desirable items on the YSR, as well as 2 open-ended "other" items that are rated by parents on a 3-point scale as not true, somewhat or sometimes true, or very true or often true for their adolescent. Norms, reliability, and validity for the CBCL have been well established (Achenbach & Edelbrock, 1983). As with the YSR, four CBCL scores were used for each parent: (a) T scores of total emotional/behavioral problems; (b) raw item mean scores of all items except the 16 socially desirable items; (c) raw item mean scores of the 1 open-ended "other" item, yielding a total of 102 items included in the raw item mean scores; (d) raw item mean scores of internalizing items; and (d) raw item mean scores of externalizing items. The internalizing and externalizing raw item mean scores were calculated by using the items from the factor-analytically derived scales identified by Achenbach and Edelbrock (1983).

**Perceived competence.** Self-perceptions of competence were assessed with the Self-Perception Profile for Children (Harter, 1985), a revision of the Perceived Competence Scale for Children (Harter, 1982). This self-report measure assesses adolescents' perceptions of...
competence in five life domains: scholastic competence, social acceptance, athletic competence, physical appearance, and behavioral conduct. The instrument also provides a separate index of global self-worth or self-esteem. Internal consistency and test-retest reliability and factorial, convergent, construct, and discriminant validity have been established (Harter, 1982, 1985). The behavioral conduct and global self-worth scales were used in the present analyses, as they were the most relevant to behavior problems and subjective distress.

Perceived subjective and perceived parental distress. A Personal Distress Questionnaire and a Perceived Parental Distress Questionnaire were developed for this study. Each form included a list of the 119 behaviors from the YSR (including the socially desirable items), and all items that the respondents had endorsed on the YSR, as well as "somewhat true or very true or often true or very true or often true" had been circled by a research assistant (see below). On the Personal Distress Questionnaire, adolescents rated each item that they had endorsed on the YSR on the degree to which it bothered them on a scale from 0 to 2. On the Perceived Parental Distress Questionnaire, adolescents rated each item that they had endorsed on the YSR on the degree to which it (a) bothered their mother (0-2) and (b) bothered their father (0-2). Adolescents who had no contact with one of their parents (as a result of divorce or death of the parent) were instructed to leave that parent's ratings blank. The means yielded three scores (mean personal distress, mean maternal distress, and mean paternal distress), which were calculated by summing the ratings of the distress items and dividing by the number of distress items for each scale. As with the YSR and CBCL raw item mean scores, positive/socially desirable items were not included, and each of the three distress ratings was subsequently broken down into internalizing and externalizing variables based on the factor-analytically derived scales for boys and girls separately for the YSR (Achenbach & Edelbrock, 1987).

Procedures

Letters of informed consent were sent home with all seventh and eighth graders at the four participating schools to obtain parent and student consent to participate in the study. During a convenient 45-min school period, small groups of students were asked to complete the YSR, to return it upon completion to a research assistant who was present in the room, and to continue working on a short demographic questionnaire and the Self-Perception Profile for Children. While the students were completing these measures, the research assistant circled the corresponding items on the Personal Distress Questionnaire and the Perceived Parental Distress Questionnaire that the adolescent had endorsed on the YSR. The instructions on the two distress questionnaires asked the adolescent to rate how much each circled item bothered him or her and how much the item bothered his or her mother and his or her father. The distress questionnaires were completed in a counterbalanced fashion after the measures mentioned above. Upon completion of these measures, students were asked to take home an envelope that contained two copies of the CBCL, one for each parent, a short demographic questionnaire, and a return envelope addressed to the researcher. Participants were identified on all forms only by a number in order to match the adolescent and parent reports.

Results

Descriptives

Means and standard deviations for the YSR, CBCL, Personal Distress Questionnaire, Perceived Parental Distress Questionnaire, and the Self-Perception Profile are presented in Table 1. The mean YSR total behavior problems T score was 55.01 (SD = 10.67), the mean mothers' CBCL total behavior problems T score was 54.60 (SD = 9.64), and the mean fathers' CBCL total behavior problems T score was 53.19 (SD = 11.99). All of the means were within the normative range. The raw item mean scores (on the basis of the 0-2 scale) of the 102 common items of the three measures are also presented. The means all fall between 0 and 1, which represent a response between not true and somewhat or sometimes true. Although the total sample of adolescents was 151, only approximately one half of their mothers (70) completed the CBCL, and approximately one third of their fathers (48) completed the CBCL. In order to investigate any possible bias in the parental response rate, t tests were performed to compare the YSR total behavior problems T score of those adolescents who had a CBCL completed by their mothers or fathers and those who did not. The YSR T scores were not significantly different when comparing those adolescents who had a CBCL completed by their mother (M = 55.34, SD = 10.80) and those who did not (M = 54.62, SD = 10.61), t(149) = 0.36, p = .720. Similarly, the YSR T scores were not significantly different when comparing those adolescents who had a CBCL completed by their father (M = 56.96, SD = 10.81) and those who did not (M = 54.10, SD = 10.53), t(49) = 1.54, p = .130. This suggests that although a substantial proportion of CBCLs were not completed, parental response rates were not selectively related to the adolescents' self-reported emotional/behavioral problems.

The mean subjective distress and perceived maternal and paternal distress are also presented in Table 1. The items were based on a 0-2 scale. All three means fell between a response of 0 (Does not bother me/my mother/my father) and 1 (Bothers me/my mother/my father somewhat or sometimes). The slight variations in NS are due to either missing data or to the adolescent's having no contact with the parent. The mean perceived competence scores for the behavioral conduct and global self-worth scales are also presented in Table 1. Both scores are comparable to norms reported by Harter (1985).

In order to investigate possible gender differences, t tests

<table>
<thead>
<tr>
<th>Measure</th>
<th>n</th>
<th>M</th>
<th>SD</th>
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</thead>
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<tr>
<td>Adolescents' emotional/behavioral problems</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>YSR T scores</td>
<td>151</td>
<td>55.01</td>
<td>10.67</td>
</tr>
<tr>
<td>Mothers' CBCL T scores</td>
<td>70</td>
<td>54.60</td>
<td>9.64</td>
</tr>
<tr>
<td>Fathers' CBCL T scores</td>
<td>48</td>
<td>53.19</td>
<td>11.99</td>
</tr>
<tr>
<td>YSR raw item mean scores</td>
<td>151</td>
<td>0.51</td>
<td>0.24</td>
</tr>
<tr>
<td>Mothers' CBCL raw item mean scores</td>
<td>70</td>
<td>0.22</td>
<td>0.16</td>
</tr>
<tr>
<td>Fathers' CBCL raw item mean scores</td>
<td>48</td>
<td>0.22</td>
<td>0.20</td>
</tr>
<tr>
<td>Adolescents' ratings of distress</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Subjective distress</td>
<td>148</td>
<td>0.83</td>
<td>0.35</td>
</tr>
<tr>
<td>Perceived maternal distress</td>
<td>144</td>
<td>0.81</td>
<td>0.34</td>
</tr>
<tr>
<td>Perceived paternal distress</td>
<td>130</td>
<td>0.69</td>
<td>0.37</td>
</tr>
<tr>
<td>Adolescents' perceived competence</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Behavioral conduct</td>
<td>144</td>
<td>2.84</td>
<td>0.64</td>
</tr>
<tr>
<td>Global self-worth</td>
<td>143</td>
<td>2.97</td>
<td>0.76</td>
</tr>
</tbody>
</table>

Note. YSR = Youth Self-Report; CBCL = Child Behavior Checklist.
comparing the means of boys and girls were performed for all 11 variables presented in Table 1. Because not one of the t tests was significant, all analyses were conducted using the whole sample. Means on all 11 variables were also compared for those adolescents who had received psychological treatment and those who had not. Although T scores and raw item mean scores for the YSR and the mothers' CBCL showed significant differences between the referred and nonreferred groups (for YSR T scores, referred M = 59.88, SD = 9.36, nonreferred M = 53.27, SD = 10.89, t(105) = 2.74, p = .007; for mothers' CBCL T scores, referred M = 59.31, SD = 11.04, nonreferred M = 52.44, SD = 8.62, t(64) = 2.59, p = .012), these differences did not remain significant after an ordered Bonferroni correction was used to control for the number of t tests that were conducted (Larzelere & Mulaik, 1977). Finally, t-test analyses of order effects indicated that there were no significant differences for any of the three distress measures on the basis of order of administration.

Correlations Among Adolescent and Parent Reports of Occurrence of Behavior

The correlations among the CBCL and YSR scores were examined to establish whether the degree of association among these variables was similar to that found in previous studies. Adolescents' self-reports of emotional/behavioral problems (total behavior problem T score on the YSR) were significantly related to their mothers' reports of their adolescents' problems (total behavior problem T score on the CBCL), r(69) = .22, p = .031. Similarly, adolescents' self-reports of emotional/behavioral problems were significantly related to their fathers' reports of their adolescents' problems, r(47) = .34, p = .010. These correlations were similar in magnitude to those found in previous studies investigating these same variables, which have ranged from .22 to .37 (e.g., Phares, Compas, & Howell, 1989). The correlations between adolescents' self-reports and each of their parents' reports did not differ significantly when compared by using Fisher's z statistic (Fisher, 1921). The correlation between mothers' and fathers' CBCL total behavior problem T scores was also significant, r(45) = .54, p < .001, which was also similar in magnitude to previous studies (e.g., r = .62; Phares et al., 1989).

In summary, these analyses suggest that the ratings of occurrence of adolescents' behavior problems by the mothers, fathers, and adolescents in this sample are similar to the patterns found in other normative samples. For the remainder of the analyses, the raw item mean scores for the YSR and both CBCLs were used. The same pattern and magnitude of correlations from the T scores were present for the raw mean item scores of occurrence of adolescents' emotional/behavioral problems.

Subjective Distress and Self-Reported Occurrence of Emotions and Behaviors

The first hypothesis, which deals with the distinction between the self-reported occurrence of an emotion or behavior and the experience of it as a problem, was investigated in two ways. First the percentages of items endorsed as having occurred but rated as not bothersome were calculated. Second, correlational analyses were completed for the occurrence and distress ratings.

The frequency of endorsement of items ranged from n = 7 on Item 72, I set fires to n = 125 on Item 3, I argue a lot. As expected, of those items that were endorsed as having occurred, a substantial percentage were rated as not distressing to the adolescents themselves, their mothers, or their fathers. When averaged across all behavior items, of those items endorsed as having occurred on the YSR, 34.3% were endorsed with Does not bother me, 38.0% were endorsed with Does not bother my mother, and 47.8% were endorsed with Does not bother my father. This suggests that when adolescents endorsed an item as having occurred, it did not necessarily mean that the adolescent was distressed by it, or that she or he believed that her or his parents were distressed by it. The range of responses on individual items was useful in achieving a better understanding of which behaviors do not distress adolescents and which behaviors adolescents think do not distress their parents. Endorsement of the response, Does not bother me ranged from a high of 70.0% on the item I run away from home to a low of 12.8% on the item I am overweight. Endorsement of the response, Does not bother my mother ranged from a high of 73.7% on the item I act like the opposite sex to a low of 7.9% on My schoolwork is poor. Endorsement of the response, Does not bother my father ranged from a high of 75.0% on Parts of my body twitch or make nervous movements to a low of 16.1% on My schoolwork is poor.

Pearson correlations between ratings of occurrence on the YSR and ratings of distress are presented in the first data column in Table 2 for total, internalizing, and externalizing behaviors and emotions. As hypothesized, adolescents' self-reported ratings of occurrence of total behaviors were significantly related to subjective distress, r(47) = .40, p < .001; perceived maternal distress, r(43) = .38, p < .001; and perceived paternal distress, r(129) = .27, p = .001. The same pattern was evident for both internalizing and externalizing behaviors and emotions, although the correlation between occurrence and paternal distress for externalizing behaviors was not significant after an ordered Bonferroni correction. On the basis of Fisher's z statistic, the correlation between occurrence and personal distress for externalizing emotions and behaviors, r(47) = .50, was significantly higher than the matched correlation for externalizing emotions and behaviors, r(47) = .16. This suggests that the association between self-reported occurrence of behaviors
Table 2
Pearson Correlations Between Ratings of Raw Item Means of Occurrence and Distress

<table>
<thead>
<tr>
<th>Type of distress</th>
<th>YSR</th>
<th>Mothers' CBCL</th>
<th>Fathers' CBCL</th>
<th>Subjective distress</th>
<th>Maternal distress</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
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<td></td>
<td></td>
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<tr>
<td>Total behaviors</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Subjective distress</td>
<td>.40***</td>
<td>.17</td>
<td>.02</td>
<td>.64***</td>
<td>.86***</td>
</tr>
<tr>
<td>Perceived maternal distress</td>
<td>.38***</td>
<td>.09</td>
<td>.17</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Perceived paternal distress</td>
<td>.27***</td>
<td>.07</td>
<td>.14</td>
<td>.58***</td>
<td></td>
</tr>
<tr>
<td>Internalizing behavior</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Subjective distress</td>
<td>.50***</td>
<td>.33**</td>
<td>.11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Perceived maternal distress</td>
<td>.41***</td>
<td>.18</td>
<td>.22</td>
<td>.59***</td>
<td></td>
</tr>
<tr>
<td>Perceived paternal distress</td>
<td>.25***</td>
<td>.04</td>
<td>.14</td>
<td>.47***</td>
<td>.86***</td>
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<tr>
<td>Externalizing behavior</td>
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<td></td>
</tr>
<tr>
<td>Subjective distress</td>
<td>.16*</td>
<td>.19</td>
<td>-.11</td>
<td>.47***</td>
<td></td>
</tr>
<tr>
<td>Perceived maternal distress</td>
<td>.26***</td>
<td>.03</td>
<td>-.01</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Perceived paternal distress</td>
<td>.15**</td>
<td>.04</td>
<td>-.03</td>
<td>.53***</td>
<td>.84***</td>
</tr>
</tbody>
</table>

Note. YSR = Youth Self-Report; CBCL = Child Behavior Checklist. All variables within each of the sections represent that dimension.
* p < .05. ** p < .01. *** p < .001.

...and subjective distress is stronger for internalizing emotions and behaviors than for externalizing emotions and behaviors. None of the other matched pairs of correlations were significantly different between internalizing and externalizing behaviors. These correlations were only moderate in magnitude, further indicating that adolescents' ratings of subjective distress differ from their ratings of the occurrence of their emotions and behaviors.

Subjective Distress and Perceived Parental Distress

The remaining correlations in Table 2 were calculated in order to investigate the relation between subjective distress, perceived maternal distress, and perceived paternal distress for total, internalizing, and externalizing emotions and behaviors. For total behaviors, all three correlations were significant at the .001 level, and the correlations between subjective distress and perceived maternal distress, \( r(140) = .64 \), as well as paternal distress, \( r(126) = .58 \), were only moderate in magnitude. The correlation between perceived maternal and paternal distress was .86 (adj = 125). Fisher's z-statistic analyses revealed that the correlation between perceived maternal and paternal distress was significantly higher (\( p < .05 \)) than both the correlation between subjective distress and perceived maternal distress, and the correlation between subjective distress and perceived paternal distress. The same pattern of relations between subjective distress, perceived maternal distress, and perceived paternal distress for total behaviors was found for internalizing and externalizing behaviors.

In order to further test the second hypothesis, two \( t \) tests were conducted to compare subjective distress with each of the perceived parental distress variables. There was no significant difference between subjective distress and perceived maternal distress, \( t(140) = 1.02, p = .309 \); however, subjective distress was significantly higher than perceived paternal distress, \( t(126) = 5.09, p < .001 \). These analyses provide partial support for the second hypothesis, suggesting that while children and adolescents do make a distinction between personal distress and parental distress, they may not make a distinction between personal distress and maternal distress when all behaviors are totaled together. The following analyses will investigate these distinctions when behaviors are broken down by the internalizing and externalizing dimension.

Analyses of Internalizing and Externalizing Distress

A 2 X 3 within-subjects repeated measures multivariate analysis of variance (MANOVA) was utilized to investigate the hypothesis regarding the internalizing/externalizing dimensions of the three distress variables, with two levels of behavior (internalizing and externalizing) and three levels of distress (to self, to mother, and to father). Mean ratings of distress to self, distress to mother, and distress to father were calculated for both internalizing and externalizing behaviors (resulting in six mean ratings on the basis of a 0–2 scale), which were analyzed in the MANOVA. The means utilized in the MANOVA are presented in Table 3. The resultant overall MANOVA was significant: \( F(2, 120) = 41.49, p < .001 \). The main effects for both the type of behavior (internalizing and externalizing) and type of distress (subjective distress, perceived maternal distress, and perceived paternal distress) were also significant: \( F(2, 120) = 24.38, p < .001 \), and \( F(2, 120) = 16.69, p < .001 \), respectively.

Post hoc \( t \) tests showed that all nine of the relevant comparisons were significant. First, for the internalizing dimension, adolescents were significantly more distressed by internalizing behaviors and emotions than they perceived their mothers to
Table 3

Means of the Distress Measures According to Type of Behavior for MANOVA Analyses

<table>
<thead>
<tr>
<th>Type of behavior</th>
<th>Subjective distress</th>
<th>Maternal distress</th>
<th>Paternal distress</th>
</tr>
</thead>
<tbody>
<tr>
<td>Internalizing</td>
<td>0.87</td>
<td>0.70</td>
<td>0.59</td>
</tr>
<tr>
<td>Externalizing</td>
<td>0.78</td>
<td>0.97</td>
<td>0.87</td>
</tr>
</tbody>
</table>

Note. The overall MANOVA, as well as the tests for main effects (type of behavior and type of distress), was significant.

Relation of Subjective Distress With Perceived Competence and Parents’ Ratings of Behavior

The fourth hypothesis proposed that the correlation between subjective distress and another self-system variable (perceptions of personal competence) would be higher than the correlation between subjective distress and parents' ratings of the adolescents' behavior. Ratings of subjective distress were significantly related to both perceptions of behavioral conduct, \( r(133) = -.24, p = .008 \), and global self-worth, \( r(132) = -.34, p < .001 \). In contrast, adolescents' ratings of subjective distress were not related to total behavior problems on the CBCL completed by either mothers, \( r(68) = .17 \), or fathers, \( r(46) = -.02 \). Although the absolute magnitudes of the subjective distress and perceived competence correlations were larger than the absolute magnitudes of the subjective distress and CBCL correlations, comparisons of these correlations using Fisher's z statistic indicated that they were not significantly different.

Discussion

Our findings indicate that adolescents' subjective distress over their emotions and behaviors is discriminable from their reports of the occurrence of their emotions and behaviors. Overall, the findings suggested, when we assessed the occurrence of adolescents' emotional/behavioral problems, that adolescents may not feel distressed by all of these emotions and behaviors. Utilizing self-report measures with adolescents, we found that their acknowledgement of the occurrence of a behavior was not the same as their feeling distressed about it.

With regard to the first hypothesis, it was found that adolescents' ratings of subjective distress were discriminable from their ratings of the occurrence of their emotions and behaviors. Although the majority of endorsed items on the YSR were rated as personally distressing, about one third (34%) of the items were not. This suggests that endorsed items are often, but not necessarily experienced as, bothersome or troubling by the respondent.

The data further indicate that adolescents' ratings of subjective distress differed from their perceptions of their parents' distress over the adolescents' behavior. Adolescents' perceptions of their mothers' and fathers' distress were more highly correlated with each other than they were with adolescents' subjective distress. It should be noted that the relations between perceived maternal and paternal distress may have been affected by the format of the measures (i.e., answering perceived maternal and paternal distress side by side on the same sheet, while answering subjective distress on a separate form). However, the finding that adolescents perceived their mothers to be more distressed than their fathers for both internalizing and externalizing behaviors suggests that adolescents were distinguishing between their parents' distress. Furthermore, adolescents' subjective distress ratings were significantly different from their perceptions of their fathers' distress, although they were not significantly different from their perceptions of their mothers' distress. Thus, the youths in the present sample generated different perceptions of the degree to which a behavior was bothersome to themselves as opposed to bothersome to their fathers, and to a lesser extent, to their mothers.

Subjective distress and perceptions of parental distress over internalizing and externalizing problems also differed in the pattern that was hypothesized. Adolescents were more distressed by internalizing than externalizing problems but perceived their parents as more distressed by externalizing than internalizing problems.
internalizing problems. These findings parallel those reported by Weisz et al. (1988) in a study of adults' ratings of children's problem behaviors. It appears that adolescents may be quite accurate in their judgements about the general types of behaviors that are bothersome to their parents. The findings are also consistent with other research indicating that adolescents are quite aware of their parents' beliefs about their behavior (Alessandri & Wozniak, 1987). Furthermore, it appears that adolescents and their parents may be diametrically opposed in their views about the types of adolescent behaviors and emotions that they find most distressing. Although this was a community sample, these issues may have ramifications for adolescents referred for treatment. Because children and adolescents rarely refer themselves for treatment, the results of this study point to the importance of evaluating children and adolescents' distress over the behaviors for which they have been referred, as well as their distress over emotions or behaviors that were not identified as part of the referral. This is not to suggest that the self-reported or parent-reported occurrence of emotions/behaviors is not important, nor that clinicians should not work to decrease behaviors that do not distress adolescents. Rather, these results suggest that obtaining data on both the occurrence of and distress over emotions and behaviors may be an integral part of the assessment process.

The findings regarding the association between subjective distress and self-perceptions of competence were less clear. Although ratings of subjective distress were significantly related to self-perceptions of behavioral conduct and global self-worth and were not significantly related to parents' ratings of the occurrence of adolescents' behaviors, these correlations were not significantly different. The failure to find a significant difference between these correlations may have been limited by the relatively small number of parents who completed the CBCL. Alternatively, subjective distress over specific behaviors may not be closely related to more global measures of self-perceptions of behavioral conduct and self-worth. Future research needs to examine the relations between subjective distress and other more behaviorally specific self-system variables, including children and adolescents' perceptions of control over their behaviors that are distressing to them, and motivational variables, including motivation to change these behaviors.

Future research also needs to build on the present study in several ways. First, future work should include a replication with a clinical sample to investigate whether the pattern of findings obtained with the present nonclinical sample holds true for adolescents who are experiencing heightened levels of these emotions/behaviors and who have been referred for treatment. Although we have implied a link between distress over behavior, motivation for treatment, and eventual outcome of treatment, these constructs need to be directly investigated in a therapeutic outcome study. Although meta-analytic studies of the effects of child and adolescent psychotherapy have not shown clear differences in outcomes for internalizing versus externalizing behaviors (Weisz, Weiss, Alickie, & Klotz, 1987), effect sizes appear to differ among outcome measures from different sources. Casey and Berman (1985) found that measures obtained from parents, therapists, and observers produced significantly larger effects than those obtained from children's self-reports, although this finding was not replicated by Weisz et al. (1987). This suggests children's perceptions of their own behavior may not have been changed as much as others' perceptions of children's behavior based on therapeutic interventions. It could be that subjective distress plays a mediating role between the perception of change in a child or adolescent's behavior and change as seen by others. Second, additional information is needed on the psychometric properties of the measures of subjective distress and perceived parental distress, including short-term test-retest reliability. Finally, the question remains as to why any of these behaviors were or were not seen as distressing to parents as well as to the adolescents themselves. Occasionally on the parental distress measures an adolescent would write a comment such as "They don't know about it," next to an item that they marked as not distressing to either parent (e.g., "I cry a lot," or "I cut classes or skip school"). This suggests the need for further investigation into the meaning of these responses through interviews or other open-ended formats. Research pursuing these questions can further the results of our study, which showed that adolescents make a distinction between the occurrence of a behavior and their distress about it, that internalizing behaviors were rated by adolescents as more distressing to themselves than to their parents, and, conversely, that externalizing behaviors were rated as more distressing to parents than to self.

References


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1991 APA Convention "Call for Programs"

The "Call for Programs" for the 1991 APA annual convention will be included in the October issue of the *APA Monitor*. The 1991 convention will be held in San Francisco, California, from August 16 through August 20. Deadline for submission of program and presentation proposals is December 14, 1990. This earlier deadline is required because many university and college campuses will close for the holidays in mid-December and because the convention is in mid-August. Additional copies of the "Call" will be available from the APA Convention Office in October.